

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

<p>The C/OH Instruction Guide explains how to complete this form.</p>		<p>1 Filer ID (Ethics Commission Filers)</p>	<p>2 Total pages filed: -4-</p>												
<p>3 CANDIDATE / OFFICEHOLDER NAME</p>	<p>MS / MRS / MR FIRST MI JAMES SCOTT NICKNAME LAST SUFFIX GREGSON</p>		<p>OFFICE USE ONLY</p> <hr/> <p>Date Received</p> <p style="font-size: 1.5em;">City Clerk</p> <p style="font-size: 1.2em;">JAN 17 2017</p> <p style="font-size: 1.5em;">City of San Marcos</p> <hr/> <p>Date Hand-delivered or Date Postmarked</p> <hr/> <table style="width: 100%;"> <tr> <td style="width: 50%;">Receipt #</td> <td style="width: 50%;">Amount \$</td> </tr> </table> <hr/> <p>Date Processed</p> <hr/> <p>Date Imaged</p>	Receipt #	Amount \$										
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<p>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</p> <p>ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE</p> <p style="font-size: 1.2em;">120 West Hopkins, Ste 200 San Marcos, TX 78666</p> <p><input type="checkbox"/> Change of Address</p>															
<p>5 CANDIDATE / OFFICEHOLDER PHONE</p> <p>AREA CODE PHONE NUMBER EXTENSION</p> <p style="font-size: 1.2em;">(512) 557-8000</p>															
<p>6 CAMPAIGN TREASURER NAME</p>	<p>MS / MRS / MR FIRST MI MS ELENA NICKNAME LAST SUFFIX DURAN</p>														
	<p>7 CAMPAIGN TREASURER ADDRESS</p> <p>STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE</p> <p style="font-size: 1.2em;">1133 LAGO VISTA, SAN MARCOS, TX 78666</p> <p>(Residence or Business)</p>														
<p>8 CAMPAIGN TREASURER PHONE</p> <p>AREA CODE PHONE NUMBER EXTENSION</p> <p style="font-size: 1.2em;">(512) 567-7691</p>															
<p>9 REPORT TYPE</p> <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded \$500 limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH - FR)</td> </tr> </table>			<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded \$500 limit	<input type="checkbox"/> Final Report (Attach C/OH - FR)					
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<p>10 PERIOD COVERED</p> <p>Month Day Year Month Day Year</p> <p style="font-size: 1.2em;">7 / 01 / 2016 THROUGH 12 / 31 / 2016</p>															
<p>11 ELECTION</p> <table style="width: 100%;"> <tr> <td style="width: 30%;">ELECTION DATE</td> <td colspan="3">ELECTION TYPE</td> </tr> <tr> <td>Month Day Year</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> Other Description</td> </tr> <tr> <td>/ /</td> <td><input type="checkbox"/> General</td> <td><input type="checkbox"/> Special</td> <td></td> </tr> </table>				ELECTION DATE	ELECTION TYPE			Month Day Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other Description	/ /	<input type="checkbox"/> General	<input type="checkbox"/> Special	
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/ /	<input type="checkbox"/> General	<input type="checkbox"/> Special													
<p>12 OFFICE</p> <p>OFFICE HELD (if any)</p> <p style="font-size: 1.2em;">San Marcos City Council PLACE 5</p>		<p>13 OFFICE SOUGHT (if known)</p>													

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SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME****JAMES SCOTT GREGSON****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	<input type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/>	SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2000⁰⁰
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1	2 FILER NAME JAMES SCOTT GREGSON	3 Filer ID (Ethics Commission Filers)
4 Date 9/15/16	5 Payee name DAVID LERMAN	
6 Amount (\$) 1,000⁰⁰	7 Payee address; City; State; Zip Code 1519 Spruce Street Philadelphia, PA 19102-4577	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 9/15/16	Payee name MARK BERINS		
Amount (\$) 1,000⁰⁰	Payee address; City; State; Zip Code 5726 VALKEITH DRIVE HOUSTON, TX 77096		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED